		PATENTAL	PPLICA	TION FEE	ne are required to re DETERMINA Form PTO-875	ATION	RECOR	D	on unless	it diep Applica	lays a valld C	MB control
,	CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY			OR OTHER THA		
	FOR BASIC FEE		NUMBER F	ILED	NUMBER EXTRA			CE CIV(II)	·	OR	SMA	LL ENTIT
	(37 CFR 1.18(a)				·		RATE	FE	E		RATE	F
	(37 CFR 1.16(c))  INDEPENDENT (37 CFR 1.16(b))	CL 411/6	mli	nus 20 = •			X \$:		=-	OR . OR .	X \$ =	\$
•		NDENT CLAIM PE		1US 3 = .		_	x \$=			OR OR	X \$=	+
	And the second s			(37 CFR 1.		[	+\$=			OR .	+ \$ =	+
10	3/06	In ∞lumn 1 is le					TOTAL			)R	TOTAL	
1	196	(Column 1				*				•		
	4 F	CLAIMS REMAININ		HIGHE	mn 2) (Column 3	<u> </u>		ENTITY	<u>ب</u> (	OR F	OTHE SMALL	R THAN ENTITY
	Z Total	- 7	Minu	PREVIO	USLY EXTRA		RATE	ADDI- TIONAL FEE	-		RATE .	ADDI- TIONAI
	Z Independent		Minu			- - <u> </u> -	,25		OR	-   <u>×</u>	.50_	FEE
	FIRST PRESE	N	IL'LE DEPE	NDENT CLAIM	(37 CFR 1.16(d))	7 [	\$ <u>100</u> =		OR	×	<u>= 2003</u> .	
				1			DTAL DD'L FEE		OR OR	+ TC	OTAL :	
F	ω .	(Column 1) CLAIMS	<del>-</del>	(Colum HIGHES	n 2) (Column 3)	- مناح ا			7 04	AC	D'L FEE	· · · · · · · · · · · · · · · · · · ·
		REMAINING AFTER AMENDMENT	.	PREVIOUS PAID FO	R PRESENT		RATE .	ADDI- TIONAL	] .		RATE	ADDI-
	Total		Minus		=	×s	=	FEE		-		TIONAL FEE
	Independent (37 CFR 1.16(b))	<u> </u>	Minus	] ""		× \$	=		OR	X S	===	· .
+	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 5			OR	+ 5_		
		(Calumus 4)				TOT ADD	L FEE		OR	TOT.		
UE		(Column 1) CLAIMS REMAINING AFTER		(Column : HIGHEST NUMBER	PRESENT	Ė	ATE	4551	l	· 		•
MEN	Total (37 CFR 1.16(c))	AMENDMENT	Minus	PREVIOUSL PAID FOR	Y EXTRA			ADDI- TIONAL FEE		. R/		ADDI- FIONAL
AMENDMENT	Independent (37 CFR 1.16(b))		Minus	***.	=	- X \$_	=		OR	X \$	=	FEE
1	FIRST PRESENTA	TION OF MULTIPLE	DEPENDE	NT CLAIM (37	CFR.1.16(d))	_ X \$	=		OR	x \$	_=	
	• If the entry in ∞!  If the "Highest M		_			TOTA ADD'L	= -		OR	+ ş_	=	

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent), is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including galbering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chlef Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

APDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.